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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	09/987,690-Conf. #7183
	Filing Date	November 15, 2001
	First Named Inventor	Robert dePinto
	Art Unit	2157
	Examiner Name	M. M. Meky
	Attorney Docket Number	027050.0102-US01

**To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450**

Please withdraw me as attorney or agent for the above identified patent application, and

- ☐ all the attorneys/agents of record.
- ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
- ☒ the attorneys/agents associated with Customer Number

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are:

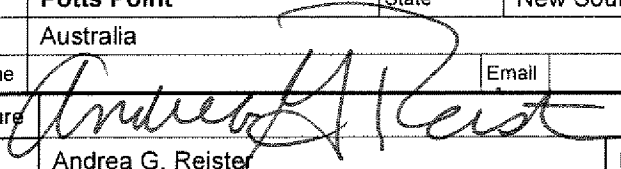
Prosecution of the application is complete, and the patentee, not the attorneys of record, will be responsible for payment of maintenance fees.

CORRESPONDENCE ADDRESS

1. ☐ The correspondence address is NOT affected by this withdrawal.
2. ☒ Change the correspondence address and direct all future correspondence to:

☐ The address associated with Customer Number:

OR

<input checked="" type="checkbox"/>	Firm or Individual Name	Robert dePinto			
Address		202/85 Macleay Street			
City		Potts Point	State	New South Wales	Zip 2011
Country		Australia			
Telephone		Email			
Signature 					
Name		Andrea G. Reister	Registration No.	36,253	
Date		November 16, 2007	Telephone No.	(202) 662-5141	

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.